

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G606		X2) MULTIPLE CONSTRUCTION A. BUILDING 01 B. WING _____		X3) DATE SURVEY COMPLETED 05/14/2013	
NAME OF PROVIDER OR SUPPLIER REM-INDIANA INC				STREET ADDRESS, CITY, STATE, ZIP CODE 3025 GREENHILLS LN S INDIANAPOLIS, IN 46222			
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K010000	<p>A Life Safety Code Recertification Survey was conducted by the Indiana State Department of Health in accordance with 42 CFR 483.470(j).</p> <p>Survey Date: 05/14/13</p> <p>Facility Number: 001175 Provider Number: 15G606 AIM Number: 100245640</p> <p>Surveyors: Mark Caraher, Life Safety Code Specialist & Robert Sutton, Life Safety Code Specialist Trainee</p> <p>At this Life Safety Code survey, REM-Indiana, Inc. was found not in compliance with Requirements for Participation in Medicaid, 42 CFR Subpart 483.470(j), Life Safety from Fire and the 2000 Edition of the National Fire Protection Association (NFPA) 101, Life Safety Code (LSC), Chapter 33, Existing Residential Board and Care Occupancies.</p> <p>This one story building with a basement was determined to be fully sprinklered. The facility has a fire alarm system with smoke detection in corridors, in bedrooms and in all living areas. The facility has a capacity of 8 and had a census of 7 at the time of this survey.</p>		K010000				

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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	<p>Calculation of the Evacuation Difficulty Score (E-Score) using NFPA 101A, Alternative Approaches to Life Safety, Chapter 6, rated the facility Slow with an E-Score of 1.9.</p> <p>Quality Review by Robert Booher, Life Safety Code Specialist-Medical Surveyor on 05/16/13.</p> <p>The facility was found not in compliance with the aforementioned regulatory requirements as evidenced by the following:</p>						

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K010130	<p>Based on observation and interview, the facility failed to ensure 1 of 3 portable fire extinguishers located in the facility was inspected at least monthly and the inspections were documented including the date and initials of the person performing the inspection. LSC 4.6, General Requirements at 4.6.12.2 requires existing LSC features obvious to the public, if not required by the Code, to be either maintained or removed. NFPA 10, the Standard for Portable Fire Extinguishers, Chapter 4-3.4.2 requires at least monthly, the date of inspection and the initials of the person performing the inspection shall be recorded. In addition NFPA 10, 4-2.1 defines inspection as a quick check an extinguisher is available and will operate. This deficient practice could affect all clients, staff and visitors.</p> <p>Findings include:</p> <p>Based on observation with the Program Director during a tour of the facility from 11:40 a.m. to 12:15 p.m. on 05/14/13, the portable fire extinguisher located in the kitchen had an affixed inspection and maintenance tag lacking a monthly inspection for February 2013. Based on interview at the time of observation, the Program Director stated no other</p>		K010130	<p>The Home Manager will be retrained to include up to date quality checks and inspections on the monthly Home Manager/PD checklist. If any problems should arise, the Home Manager will inform the appropriate maintenance personnel.</p> <p>The Home Manager will ensure that all fire extinguishers are maintained and inspected within the appropriate time frames (annually or more) as needed.</p> <p>Ongoing, the Home Manager will complete the monthly Home Manager/PD checklist and request that any repairs be made in the appropriate timeframe.</p> <p>Responsible Party: Home Manager</p> <p>Completion Date: June 7, 2013</p>		06/17/2013	

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	documentation of monthly fire extinguisher inspections was available for review and acknowledged the monthly inspection for February 2013 for the aforementioned portable fire extinguisher had not been documented.						

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K01S051	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD A manual fire alarm system is provided in accordance with Section 9.6, 33.2.3.4.1.</p> <p>Exception No 1: Where there are interconnected smoke detectors meeting the requirements of 33.2.3.4.3 and there is not less than one manual fire alarm box per floor arranged to continuously sound the smoke detector alarms.</p> <p>Exception No. 2: Other manually activated continuously sounding alarms acceptable to the authority having jurisdiction.</p> <p>Based on record review, observation and interview; the facility failed to ensure 1 of 1 manual fire alarm systems was maintained in accordance with Section 9.6. Section 9.6.1.4 states a fire alarm system shall be installed, tested and maintained in accordance with the applicable requirements of NFPA 72, National Fire Alarm Code. NFPA 72, Section 7-1.1.2 states system defects shall be corrected. This deficient practice could affect all clients, staff and visitors.</p> <p>Findings include:</p> <p>Based on review of USAutomatic Sprinkler Corporation "Alarm & Detection Equipment Test Report" documentation dated 10/02/12 during record review at the Corporate Office with the Area Director from 10:10 a.m. to 11:10 a.m. on 05/14/13, the smoke</p>		K01S051	<p>Indiana MENTOR in conjunction with USAutomatic, will ensure that the smoke detector that 'failed' the most recent functional testing of the manual fire alarm system is replaced and/or repaired.</p> <p>Ongoing, the Area Director, in conjunction with the Maintenance Supervisor will review all reports of required testing completed by USAutomatic to ensure that any and all needed follow up is completed and on time.</p> <p>This repair was confirmed as being completed on 5/18/2013 (see attachments).</p> <p>Responsible Party: Indiana MENTOR Maintenance Completion Date: April 14, 2012</p>		06/13/2013	

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	<p>detector in the bedroom near the dining room was listed as "Fail" for the most recent functional testing of the manual fire alarm system. Based on interview at the time of record review, the Area Director stated no other documentation was available for review for the subsequent repair or replacement of the aforementioned smoke detector and acknowledged the smoke detector in the bedroom near the dining room failed the most recent functional testing of the manual fire alarm system. Based on observation with the Program Director during a tour of the facility from 11:40 a.m. to 12:15 p.m. on 05/14/13, the smoke detector in the bedroom near the dining room is hard wired to the fire alarm system.</p>						

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K01S056	<p>483.470(j)(1)(i) LIFE SAFETY CODE STANDARD PROMPT Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7, 33.2.3.5.2 and activates the fire alarm system in accordance with 33.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction.</p> <p>Exception No. 1: In prompt evacuation facilities, an automatic sprinkler system in accordance with NFPA 13D, Standard for the Installation of Sprinkler Systems in One and two Family Dwellings and Manufactured Homes, is permitted. Automatic sprinklers are not required in closets not exceeding 24 sq. ft. and in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or materials providing a 15 minute thermal barrier.</p> <p>Exception No. 2: Not applicable</p> <p>Exception No. 3: In prompt and slow evacuation capability facilities where an automatic sprinkler system is in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, automatic sprinklers are not required in closets not exceeding 24 sq. ft and in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or material providing a 15 minute thermal barrier.</p> <p>Exception No. 4: In prompt and slow evacuation capability facilities up to and including four stories in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in</p>						

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	<p>Residential Occupancies up to and Including Four Stories in Height, are permitted.</p> <p>Exception No. 5: Not applicable</p> <p>Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 33.2.3.5.5.</p> <p>SLOW Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7 and activates the fire alarm system in accordance with 33.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction.</p> <p>Exception No. 1: Not Applicable</p> <p>Exception No. 2: Not Applicable</p> <p>Exception No. 3: In prompt and slow evacuation capability facilities where an automatic sprinkler system is in accordance with NFPA 13, Standard for the Installation of Sprinkler Systems, automatic sprinklers are not required in closets not exceeding 24 sq. ft. and in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or material providing a 15 minute thermal barrier.</p> <p>Exception No. 4: In prompt and slow evacuation capability facilities up to and including four stories in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height, are permitted.</p> <p>Exception No. 5: Not Applicable</p>						

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	<p>Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 33.2.3.5.5.</p> <p>IMPRACTICAL Where an automatic sprinkler system is installed, for either total or partial building coverage, the system is in accordance with Section 9.7 and activates the fire alarm system in accordance with 33.2.3.4.1. The adequacy of the water supply is documented to the authority having jurisdiction. 33.2.3.5.2.</p> <p>Exception No. 1: Not Applicable.</p> <p>Exception No. 2: In slow and impractical evacuation capability facilities, an automatic sprinkler system in accordance with NFPA 13D, Standard for the Installation of Sprinkler Systems in One and Two Family Dwellings and Manufactured Homes, with a 30 minute water supply, is permitted. All habitable areas and closets are sprinklered. Automatic sprinklers are not required in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or materials providing a 15 minute thermal barrier.</p> <p>Exception No. 3: Not Applicable.</p> <p>Exception No. 4: Not Applicable.</p> <p>Exception No. 5: In impractical evacuation capability facilities up to and including four stories in height, systems in accordance with NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to and Including Four Stories in Height, are permitted. All</p>						

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	<p>habitable areas and closets are sprinklered. Automatic sprinklers are not required in bathrooms not exceeding 55 sq. ft., provided that such spaces are finished with lath and plaster or materials providing a 15 minute thermal barrier.</p> <p>Exception No. 6: Initiation of the fire alarm system is not required for existing installations in accordance with 33.2.3.5.5. Based on observation and interview, the facility failed to ensure 1 of over 20 sprinkler heads in the facility were maintained. NFPA 13R, Standard for the Installation of Sprinkler Systems in Residential Occupancies up to an Including Four Stories in Height, Section 2-4.5.7 states escutcheon plates used to create a recessed or flush-type sprinkler shall be part of a listed sprinkler assembly. This deficient practice could affect all clients, staff and visitors.</p> <p>Findings include:</p> <p>Based on observation with the Program Director during a tour of the facility from 11:40 a.m. to 12:15 p.m. on 05/14/13, the bedroom near the dining room had a sprinkler head location with a missing escutcheon plate which left a two inch opening into the ceiling. Based on interview at the time of observation, the Program Director acknowledged the aforementioned sprinkler head location had a missing escutcheon plate which left</p>		K01S056	<p>The Maintenance Supervisor has requested that USAutomaticrepair/replace the eschutcheon plate that was noted to be missing. This repair was completed on 5/18/2013. Please see attachment.</p> <p>The Maintenance Supervisor will be retrained on ensuringthat all recommendations made by USAutomatic will be followed up on in a timelymanner.</p> <p>Ongoing, the Maintenance Supervisor will stay in constantcontact with the contact from USAutomatic to ensure that all work and updatesare completed and followed up with.</p> <p>Completion Date: June 17, 2013</p> <p>Responsible Party: USAutomatic, Maintenance Supervisor ofIndiana Mentor.</p>		06/17/2013	

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	a two inch opening into the ceiling.						